

FEC FORM 2

STATEMENT OF CANDIDACY

SENATE

17 MAY -2 PM 3:13

1. (a) Name of Candidate (in full) Gillibrand, Kirsten, Elizabeth, .			2. Candidate's FEC Identification Number SONY00410		
(b) Address (number and street) 52 East Road			<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Brunswick NY 12180			3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought Senate		6. State & District of Candidate NY	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Gillibrand for Senate		
(b) Address (number and street) 126 C Street, NW 2nd Floor		
(c) City, State, and ZIP Code Washington DC 20001		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES


(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Gillibrand Victory Fund		
(b) Address (number and street) 124 Washington Street Suite 101		
(c) City, State, and ZIP Code Foxboro MA 02035		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate 	Date 4/29/17
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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or
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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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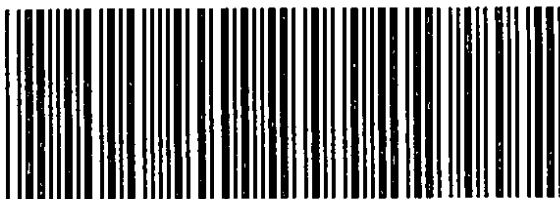
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